Guiding Good Choices for Health: Increasing the Reach of Effective Family-Focused Intervention Through Virtual Implementation in Pediatric Primary Care

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* We have no conflicts of interest to disclose.
# GGC4H Leadership Team & Funders

## Guiding Good Choices for Health (GGC4H)

### GGC4H Scientific Leadership

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<tr>
<th>University of Washington</th>
<th>Kaiser Permanente Northern CA</th>
<th>Kaiser Permanente Colorado</th>
<th>Henry Ford Health System</th>
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<tr>
<td>Margaret Kuklinski, PhD, MPI</td>
<td>Stacy Sterling, DrPH, MPI</td>
<td>Arne Beck, PhD, Site PI</td>
<td>Jordan Braciszewski, PhD, Site PI</td>
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<td>Sabrina Oesterle, PhD Methodologist</td>
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<td>Celeste Zabel, MA, Site PM</td>
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<td>Jennifer Boggs, PhD, Co-I</td>
<td>Farah Elsiss, MA, Site PM</td>
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<td>Matt Daley, MD Physician Leader</td>
<td>Amy Loree, PhD, Co-I</td>
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### NIH Leadership

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<th>NCCIH</th>
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<tr>
<td>Beda Jean-Francois, PhD Project Officer</td>
<td>Sarah Steverman, PhD Project Scientist</td>
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<td>Liz Ginexi, PhD, Project Scientist</td>
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<td>Ad Hoc Members</td>
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<td>Qiu Yu, PhD, NCCIH</td>
<td>Elizabeth Nielsen, PhD, ODP</td>
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<td>Erica Spotts, PhD, OBSSR</td>
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*Bold designates Executive Committee member. Richard Catalano, PhD, was also an MPI on this project until his retirement in 2019.*
Guiding Good Choices

► 5-session program for all parents / caregivers of adolescents ages 9-14

1. Learn a strategy for promoting health and wellbeing
2. Set healthy, clear guidelines and use positive discipline
3. Deal with anger constructively
4. Learn ways to resist negative influences (with adolescents)
5. Strengthen bonds, build life skills

► GGC RCTs – Sustained population level effects with Midwest samples
   • Families: Better communication, closer relationships, less family conflict
   • Adolescents: Lower substance use and antisocial behavior, fewer symptoms of depression for 4-6 years

Guiding Good Choices for Health (GGC4H)

- Support from NCCIH, co-funders NIDA, ODP, OBSSR
- Pragmatic longitudinal cluster-randomized trial
  - 75 pediatricians in 3 healthcare systems
  - 1,975 adolescents, age 13 at baseline
  - Offer GGC to all parents in intervention arm

- Assess implementation and adolescent health:
  - Implementation feasibility
  - Effectiveness: Adolescent health
    - Primary outcome: Substance use initiation
    - Secondary outcomes: Depression, antisocial behavior, substance use prevalence

- NCCIH Supplement: Implementation of Guiando Buenas Decisiones with Latinx families

* 4UH3AT00983803, Kuklinski/Sterling: Reach, Effectiveness, Adoption, Implementation, Maintenance
5-Year Longitudinal Cluster-randomized Trial

**Randomize**
- Randomized 75 pediatricians
- **Strata**
  - HCS, clinic
- **Constraints**
  - Pediatrician gender,
  - Panel size,
  - % Medicaid-insured

**Recruit**
- Recruited 1,975 adolescents in 2 Cohorts
  - Gender balanced
  - Racially and ethnically diverse
  - Demographically similar trial arms

**Intervene**
- Offered GGC to all caregivers in intervention arm
  - 2 modalities
    - Virtual groups
    - Digital self-guided

**Evaluate**
- RE-AIM & PRISM frameworks
- Implementation Outcomes
- Adolescent health outcomes
  - Substance use initiation - primary
- Mechanisms
- Cost-effectiveness

Year 1 was a planning year. GGC4H study protocol: Scheuer et al., 2022
## Today: Implementation Findings

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<th>Topic</th>
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<tr>
<td>Barriers and facilitators to implementation and sustainability of Guiding Good Choices in integrated healthcare systems</td>
<td><strong>Stacy Sterling</strong>, DrPH</td>
<td>Center for Addiction and Mental Health Research, Kaiser Permanente Northern California</td>
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<td>Virtual implementation of Guiding Good Choices: Lessons learned from intervention adaptation in response to COVID-19</td>
<td><strong>Hannah Scheuer</strong>, MSW</td>
<td>Social Development Research Group, School of Social Work, University of Washington</td>
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<td>Assessing implementation fidelity of the Guiding Good Choices program in a virtual environment</td>
<td><strong>Kristi Morrison</strong>, BA</td>
<td>Social Development Research Group, School of Social Work, University of Washington</td>
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**Discussant:**

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National Institutes of Health